SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Case 2 Complete items 1, 2, and 3. Also complete A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, ☐ Agent X or on the front if space permits. ☐ Addressee D. Is delivery address different from item 1? 1. Article Addressed to: ☐ Yes If YES, enter delivery address below: Nancy L. Worley Secretary of State for AL State Capitol, Rm 5105 600 Dexter Avenue Montgomery, AL 36103 Service Type Certified Mail Express Mail
Return Receipt for Merchandise □ Registered ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number (Capy from service) label PS Form 3811, July 1999 Domestic Return Receipt

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